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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

2003-0072.01

First Named Inventor

James D. Anderson, Jr.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Sealed Fluidic Interfaces Utilizing Laser Welding

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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Address

City

State

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Country

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any])

James D.

Family Name
or Surname

Anderson, Jr.

Inventor's
Signature

Date

12-11-03

Residence: City

State

Country

Citizenship

Harrodsburg

KY

U.S.

Mailing Address

207 Beams Dr.

City

State

ZIP

Country

Harrodsburg

KY

40330

U.S.A.

NAME OF SECOND INVENTOR:☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any])

Tim

Family Name
or Surname

Frasure

Inventor's
Signature

Date

12/11/03

Residence: City

State

Country

Citizenship

Georgetown

KY

U.S.

Mailing Address

423 Finnell Rd.

City

State

ZIP

Country

Georgetown

KY

40324

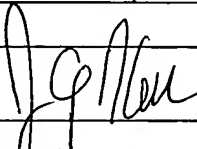

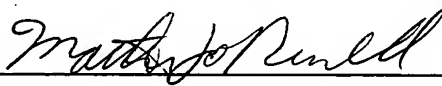
U.S.A.

☒Additional inventors or a legal representative are being named on the 2 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
James A.		Kerr	
Inventor's Signature 		Date <u>12/11/2003</u>	
Residence: City Lexington	State KY	Country U.S.A.	Citizenship U.S.
Mailing Address 2875 Palumbo Dr.			
Mailing Address Apt. #206			
City Lexington	State KY	Zip 40509	Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Steven R.		Komplin	
Inventor's Signature 		Date <u>11 DEC 03</u>	
Residence: City Lexington	State KY	Country U.S.A.	Citizenship U.S.
Mailing Address 2201 Escondida Way			
Mailing Address			
City Lexington	State KY	Zip 40515	Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Matthew J.		Russell	
Inventor's Signature 		Date <u>12/11/03</u>	
Residence: City Stamping Ground	State KY	Country U.S.A.	Citizenship U.S.
Mailing Address 252 Galloway Rd.			
Mailing Address			
City Stamping Ground	State KY	Zip 40379	Country U.S.A.

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ann M.		Trebolo	
Inventor's Signature <i>Ann Trebolo</i>		Date <i>12-11-2003</i>	
Residence: City Nicholasville	State KY	Country U.S.A.	Citizenship U.S.
Mailing Address 100 Orange Blossom Ct.			
Mailing Address			
City Nicholasville	State KY	Zip 40356	Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jon B.		Whitney	
Inventor's Signature <i>Jon B Whitney</i>		Date <i>Dec 11, 2003</i>	
Residence: City Georgetown	State KY	Country U.S.A.	Citizenship U.S.
Mailing Address 168 Drake Lane			
Mailing Address			
City Georgetown	State KY	Zip 40324	Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	James D. Anderson, Jr.
Title	Sealed Fluidic Interfaces Utilizing Laser Welding
Art Unit	
Examiner Name	
Attorney Docket Number	2003-0072.01

I hereby appoint:

☒ Practitioners associated with the Customer Number:

21972

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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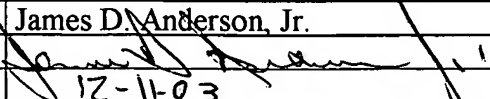
☐ The address associated with Customer Number:

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<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City	State	Zip		
Country				
Telephone	Fax			

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	James D. Anderson, Jr.		
Signature			
Date	12-11-03	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 7 forms are submitted.

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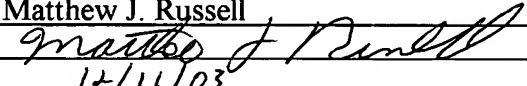
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Name	Matthew J. Russell		
Signature			
Date	12/11/03	Telephone	232-7176

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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Attorney Docket Number	2003-0072.01

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Telephone		Fax		

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Jon B. Whitney		
Signature	<i>Jon B. Whitney</i>		
Date	Dec 11, 2003	Telephone	502-867-0491

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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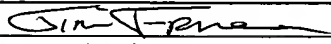
<input type="checkbox"/> Firm or Individual Name			
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SIGNATURE of Applicant or Assignee of Record

Name	Tim Frasure		
Signature			
Date	12/11/03	Telephone	859-232-4272

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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Attorney Docket Number	2003-0072.01

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<input type="checkbox"/> Firm or Individual Name				
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City	State	Zip		
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I am the:

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Ann M. Trebolo		
Signature	<i>Ann Trebolo</i>		
Date	12-11-2003	Telephone	859-232-2613

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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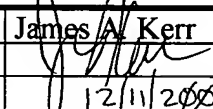
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<input type="checkbox"/> Firm or Individual Name				
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I am the:

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	James A. Kerr		
Signature			
Date	12/11/2003	Telephone	859-232-5280

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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<input type="checkbox"/> Firm or Individual Name				
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Steyen R. Komplin		
Signature	<i>Steyen R. Komplin</i>		
Date	11 DEC 03	Telephone	859 232-4818

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 7 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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